

Form: X-EA
Regulation Section: 78 & 80

**APPLICATION FOR AUTHORIZATION TO EXPORT MEDICINAL
PRODUCT(S)**

I, hereby apply for a authorization to export for following medicinal products for sale and distribution.

Sl. No.	Product Name	Pack	Composition (With Strength)	Registration No.

Address of the premises/Country (where it is to be exported):

.....
.....

Declaration (please tick the boxes):

- I hereby declare that the documents submitted above/all information provided is true to my knowledge and will be liable for any consequences if any information provided is proved to be false or misleading.
- If my application is granted, I shall abide by the Medicines Act and Medicines Regulations and any other standards set by the Authority.

Signature of applicant:

Name:

Address:

Date: